

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art::	
CD-ROM or CD-R?::	
Number of CDs::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	AFFINITY SELECTION-BASED
Title::	SCREENING OF HYDROPHOBIC
Title::	PROTEINS
Attorney Docket Number::	111025-173
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	10
Total Drawing Sheets::	10
Small Entity?::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jason
Middle Name::	S.
Family Name::	Felsch
Name Suffix::	
City of Residence::	Waltham
State or Province of Residence::	MA
Country of Residence::	
Street of Mailing Address::	11 Chase Road
Street of Mailing Address::	
City of Mailing Address::	Waltham
State or Province of Mailing Address::	MA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	02452-6401

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name:: Allen
Family Name:: Annis
Name Suffix:: Jr.
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence::
Street of Mailing Address:: 14 Remington Street
Street of Mailing Address::
City of Mailing Address:: Cambridge
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02138

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Krishna
Middle Name::
Family Name:: Kalghatgi
Name Suffix::
City of Residence:: Westboro
State or Province of Residence:: MA
Country of Residence::
Street of Mailing Address:: 25 Jacob Amsden Road
Street of Mailing Address::
City of Mailing Address:: Westboro
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 01581

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Huw
Middle Name:: M.
Family Name:: Nash
Name Suffix::
City of Residence:: Cambridge

State or Province of Residence:: MA
Country of Residence::
Street of Mailing Address:: 109 River Street
Street of Mailing Address::
City of Mailing Address:: Cambridge
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02139

Correspondence Information

Correspondence Customer Number:: 23483
Phone Number:: 617-526-6000
Fax Number:: 617-526-5000
E-Mail Address:: robert.mcisaac@haledorr.com

Representative Information

Representative Customer Number:: 23483

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/258,970	December 29, 2000

Assignee Information

Assignee Name:: NeoGenesis Pharmaceuticals, Inc.
Street of Mailing Address:: 840 Memorial Drive
City of Mailing Address:: Cambridge
State or Province of Mailing Address:: MA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 02139